Approved for use through 1/31/2006, OMB 0661-0032 U.S. Peters and I recommend and of 1995, no persons are required to respond to a confection of information unless & displays a visid CMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875 Effective December 8, 2004 APPLICATION AS FILED - PART (OTHER THAN (Column 1) OR · (Column 2) SMALL ENTITY SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BATE IS FEE A BASIC FEE BY CFR 1 18(4) (0) or (c) RATE IS FEE (1) NA N/A 150.00 N/A N/A 300.00 BEARCH FEE N/A NIA 37 CFR 1 16(1). (4. or (m)) \$250. N/A \$600 EXAMINATION FEE NA 12 CFA 1 16(0). 19). or (0) N/A NA \$100 NA \$200 DTAL CLAIMS 37 CFR (16(4) X1 25 minus 20 e X\$50 OR NDEPENDENT CLAIMS X100 37 CFR 1 16(N) minus 3 X200 If the specification and drawings exceed 100 **IPPLICATION SIZE** sheels of paper, the application size fee due ts \$250 (\$125 for small entity) for each H CFR 1 JEIGH additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1:16(s). LULTIPLE DEPENDENT CLAIM PRESENT DI CFR 1 16(1) +160= +360= If the difference is column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II . OTHER THAN OR (Column 2) (Column 1) (Column 3) SMALL ENTITY . SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (1) RATE (\$), AFTER Ub PREVIOUSLY FXTRA TIONAL TIONAL AMENDMENT PAID FOR FEE (\$) FEE (f) Total Minus 54 X\$ 25 X\$50. OR Minus X100 X200 OR Application Size Fee (37 CFR 1.16(s)) PARST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (DIT CER 1.160) 4180= +360= OR TOTAL ADOX FEE

| (Cottonia 1) | | | · (Column 2) | (COMMU 3) | |
|--|--|-------------|---|------------------|--|
| | CLAIMS REMAINING AFTER. AMENOMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | |
| Total or | . 54 | Minus | " S4 | • | |
| Endependent (S7 CFR L14(n)) | • 3 | Minus · | " 3 | ° _ | |
| Application Size Fee (37 CFR 1.16(s)) | | | | | |
| FIRST PRESENT | ATION OF MALTOPLE | - DEPEND | ENT CLAIM (STOFF | R 1.16@) | |

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| ··· | | • | _/ | |
|---------------|-----------------------------|------|--------------------|----------------------------|
| RATE (I) | ADDI- TIONAL FEE (\$) | | RATE (S) | ADOI- TIONAL FEE(\$) |
| X\$ 25 . | | OR | X\$50 . | |
| X100 . | | OR - | X200 | |
| +180= | | OR | +360± | |
| TOTAL ADDITEE | | OR | TOTAL ADD'L FEE | , |

If the entry in column 1 is less than the entry in column 2, write "o' in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Discitin of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the pubble which is to file (and by the process) an application. Confidentially is governed by 35 U.S.O. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, appearing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments remark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. OO NOT SEND FEES OR COMPLETED FORMS TO THIS 255, SEND TO: Commissioner for Palents. P.O. Box 1450. Alexandria, VA 22313-1450. 185. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460,